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Bib Data Sheet

CONFIRMATION NO. 1445

SERIAL NUMBER 09/499,556	FILING DATE 02/07/2000 RULE	CLASS 070	GROUP ART UNIT 3676	ATTORNEY DOCKET NO. BWD:0537.069
APPLICANTS Paul R. Davis, Corvallis, OR;				
** CONTINUING DATA ***** THIS APPLICATION IS A CIP OF 09/264,246 03/08/1999 ABN				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY ** ** 04/03/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input checked="" type="checkbox"/>		STATE OR COUNTRY OR	SHEETS DRAWING 16	TOTAL CLAIMS 34
Examiner's Signature <i>[Signature]</i> Initials <i>LG</i>		INDEPENDENT CLAIMS 4		
ADDRESS 152				
TITLE Electronic access control device				
FILING FEE RECEIVED 510	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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Patent and Trademark Office

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 Washington, D.C. 20231

SERIAL NUMBER 09/499,556	FILING DATE 02/07/2000 RULE -	CLASS 070	GROUP ART UNIT 3627	ATTORNEY DOCKET NO. BWD:0537.069
APPLICANTS Paul R. Davis, Corvallis, OR ;				
** CONTINUING DATA ***** THIS APPLICATION IS A CIP OF 09/264,246 03/08/1999 ** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 04/03/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> LG Examiner's Signature Initials		STATE OR COUNTRY OR	SHEETS DRAWING 16	TOTAL CLAIMS 34
			INDEPENDENT CLAIMS 4	
ADDRESS Bruce W Dekock 1600 ODS Tower 601 S W Second Avenue Portland ,OR 97204				
TITLE Electronic access control device				
FILING FEE RECEIVED 510	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	